

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Congressional Black Caucus PAC

ADDRESS (number and street)

1831 Bay Street SE

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00147512

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2009

through

12

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Earl R. Jenkins

Signature of Treasurer

Electronically Filed by Earl R. Jenkins

Date

07

28

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Congressional Black Caucus PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2009	152364.26
(b) Cash on Hand at Beginning of Reporting Period .....	312633.84	
(c) Total Receipts (from Line 19) .....	143033.33	433733.29
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	455667.17	586097.55
7. Total Disbursements (from Line 31) .....	134329.50	246571.31
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	321337.67	339526.24
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Congressional Black Caucus PAC

Report Covering the Period:

From:

M M  
0 7D D  
0 1Y Y W Y  
2 0 0 9

To:

M M  
1 2D D  
3 1Y Y Y Y  
2 0 0 9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	20250.00	32500.00
(ii) Unitemized .....	793.00	793.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	21043.00	33293.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	120694.00	398194.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	141737.00	431487.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	1296.00	1296.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.33	950.29
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	143033.33	433733.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	143033.33	433733.29

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	106329.50	203571.31	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	106329.50	203571.31	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	35000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	8000.00	8000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	134329.50	246571.31	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	134329.50	246571.31	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	141737.00	431487.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	141737.00	431487.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	106329.50	203571.31
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1296.00	1296.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	105033.50	202275.31

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Advent Capital Management LLC

Mailing Address 1271 Avenue of the Americas  
 FI 45

City State Zip Code  
 New York NY 10020

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829473

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

James L. Clarke

Mailing Address 12002 Bernard Dr

City State Zip Code  
 Silver Spring MD 20902-1877

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 ASAE

Occupation  
 Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829363

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Chester Davenport

Mailing Address 6903 Rockledge Dr

City State Zip Code  
 Bethesda MD 20817-1893

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Georgetown Partners

Occupation  
 Managing Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 0 9

Transaction ID: C4829282

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

10250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Harold Ford, Sr.

Mailing Address 7966 Fisher Island Dr

City

Miami Beach

State

FL

Zip Code

33109-1037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829324

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

John Graham IV

Mailing Address 9156 Fort Fisher Ct

City

Burke

State

VA

Zip Code

22015-2116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASAE

Occupation  
President/CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829351

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Johnson

Mailing Address PO Box 5010

City

Monroe

State

CT

Zip Code

06468-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RLJ COMPANIES

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829290

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

3750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Tiffany Moore

Mailing Address 417 Quackenbos St NW

City

Washington

State

DC

Zip Code

20011-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

Transaction ID: C4829319

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Lawrence Parks

Mailing Address 1661 Crescent Pl NW

City

Washington

State

DC

Zip Code

20009-4008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Federal Home Loan Bank

Occupation

Senior Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829227

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

The Williams Capital Group LP

Mailing Address 650 5th Ave  
Fl 11

City

New York

State

NY

Zip Code

10019-6108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829478

Amount of Each Receipt this Period

5000.00

PARTNERSHIP--partners below if itemized

**SUBTOTAL** of Receipts This Page (optional) .....

6250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 58

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Christopher Williams

Mailing Address 650 5th Ave  
 Fl 11

City State Zip Code  
 New York NY 10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 The Williams Capital Mana-  
 gement Group

Occupation  
 Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 3 / 2 0 0 9

Transaction ID: C5490350

Amount of Each Receipt this Period

5000.00

**[MEMO ITEM]**

\*

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

20250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

AFSCME PEOPLE

Mailing Address 1625 L St NW

City

Washington

State

DC

Zip Code

20036-5665

FEC ID number of contributing  
federal political committee.

**C**

C00011114

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 9

Transaction ID: C4829936

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

American Dental PAC

Mailing Address 1111 14th St NW  
Ste 1100

City

Washington

State

DC

Zip Code

20005-5627

FEC ID number of contributing  
federal political committee.

**C**

C00000729

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4830069

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

American Express PAC

Mailing Address 801 Pennsylvania Ave. NW STE 650

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

**C**

C00040535

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 9

Transaction ID: C4830193

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

AMERICAN FEDERATION OF TEACHERS STAFF UNION COMMITTEE ON POLITICAL EDUCATION

Mailing Address 555 NEW JERSEY AVE NW

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.

**C**

C00157545

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 9

Transaction ID: C4829971

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

American Optometric Association PAC

Mailing Address 1505 Prince Street  
Suite 300

City

Alexandria

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

**C**

C00024968

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4830098

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

American Speech-Language-Hearing Assn PAC(ASAH PAC)

Mailing Address 2200 Research Blvd.

City

Rockville

State

MD

Zip Code

20850

FEC ID number of contributing  
federal political committee.

**C**

C00210666

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829733

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

8000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Amylin Pharmaceuticals Inc. PAC

Mailing Address 9360 Town Centre Dr.

City

San Diego

State

CA

Zip Code

92121

FEC ID number of contributing  
federal political committee.

**C**

C00427021

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 1 / 2 0 0 9

Transaction ID: C4830172

Amount of Each Receipt this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

ANHEUSER-BUSCH PAC

Mailing Address One Busch Place 202-7

City

St Louis

State

MO

Zip Code

63118

FEC ID number of contributing  
federal political committee.

**C**

C00034488

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

Transaction ID: C4829696

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

Bank of America Corporation PAC

Mailing Address 600 Peachtree Street, NE  
FI 3

City

Atlanta

State

GA

Zip Code

30308

FEC ID number of contributing  
federal political committee.

**C**

C00364778

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829652

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

9000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Calpine Corporation PAC

Mailing Address 50 West San Fernando Street

City

San Jose

State

CA

Zip Code

96113

FEC ID number of contributing  
federal political committee.

**C** C00362640

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829987

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

CH2M Companies LTD PAC

Mailing Address 9191 S Jamaica St

City

Englewood

State

CO

Zip Code

80112-5946

FEC ID number of contributing  
federal political committee.

**C** C00143305

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

Transaction ID: C4829905

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Coca-Cola Co. Nonpartisan Cmte for Good Govt

Mailing Address P.O. Box 723040

City

Atlanta

State

GA

Zip Code

31139

FEC ID number of contributing  
federal political committee.

**C** C00012468

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4830106

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Committee to Re-Elect Ed Towns

Mailing Address 438 Lewis Avenue

City

Brooklyn

State

NY

Zip Code

11233

FEC ID number of contributing  
federal political committee.

**C**

C00197285

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

82.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

Transaction ID: C4829848

Amount of Each Receipt this Period

82.00

**B.**

Full Name (Last, First, Middle Initial)

Dominion Political Action Committee

Mailing Address PO Box 26666

One James River Plaza, 20th Floor

City

Richmond

State

VA

Zip Code

23261-6666

FEC ID number of contributing  
federal political committee.

**C**

C00108209

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4830034

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

Eli Lilly & Company Political Action Committee

Mailing Address Lilly Corporate Ctr

City

Indianapolis

State

IN

Zip Code

46285-0001

FEC ID number of contributing  
federal political committee.

**C**

C00082792

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 9

Transaction ID: C4830205

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

5082.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)  
Exelon Corporation Political Action Committee

Mailing Address 10 S Dearborn St

City State Zip Code  
Chicago IL 60603-2300

FEC ID number of contributing  
federal political committee. **C** C00141218

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829761

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Fleishman-Hillard Inc. PAC

Mailing Address 200 North Broadway

City State Zip Code  
Saint Louis MO 63103

FEC ID number of contributing  
federal political committee. **C** C00200659

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 9

Transaction ID: C4830112

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Genworth Financial Inc. PAC

Mailing Address 6620 West Broad Street

City State Zip Code  
Richmond VA 23230

FEC ID number of contributing  
federal political committee. **C** C00404194

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 1 / 2 0 0 9

Transaction ID: C4830114

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Genzyme Corporation PAC

Mailing Address 1850 K Street, NW  
Suite 650

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00393736

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829722

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL PAC

Mailing Address 101 Constitution Ave NW  
SUITE 500 WEST

City State Zip Code  
Washington DC 20001-2133

FEC ID number of contributing  
federal political committee.

**C** C00096156

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

Transaction ID: C4829525

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Independent Insurance Agents & Brokers of America, Inc. PAC

Mailing Address 412 1st St SE  
Ste 300

City State Zip Code  
Washington DC 20003-1804

FEC ID number of contributing  
federal political committee.

**C** C00022343

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 1 / 2 0 0 9

Transaction ID: C4829931

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)  
Int'l Longshoremen's Association AFL-CIO COPE

Mailing Address 17 Battery Place

City State Zip Code  
New York NY 10004

FEC ID number of contributing  
federal political committee. **C** C00158576

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

Transaction ID: C4830119

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
Ironworkers Political Action League

Mailing Address 1750 New York Avenue, N.W. Suite 4

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829507

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Kilpatrick for United States Congress

Mailing Address PO Box 32175

City State Zip Code  
Detroit MI 48232

FEC ID number of contributing  
federal political committee. **C** C00317842

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

112.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 1 / 2 0 0 9

Transaction ID: C4829885

Amount of Each Receipt this Period

112.00

**SUBTOTAL** of Receipts This Page (optional) .....

10112.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)  
LeClairRyan Political Action Committee

Mailing Address 1101 Connecticut Ave. NW  
STE 600

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00442673

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829570

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Lockheed Martin Corporation Employees PAC

Mailing Address 1550 Crystal Drive  
Suite 300

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing  
federal political committee.

**C** C00303024

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4830038

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)  
Nasdaq OMX Group Inc. PAC

Mailing Address 1100 New York Ave NW  
Suite 310, East Tower

City State Zip Code  
Washington DC 20005-3918

FEC ID number of contributing  
federal political committee.

**C** C00366013

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

Transaction ID: C4829527

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

9500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

National Association of Home Builders (Build PAC)

Mailing Address 1201 15th St NW

City

Washington

State

DC

Zip Code

20005-2842

FEC ID number of contributing  
federal political committee.

**C**

C00000901

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 9

Transaction ID: C4829822

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Northwestern Mutual Life Federal PAC

Mailing Address 720 E. Wisconsin Ave.

City

Milwaukee

State

WI

Zip Code

53202

FEC ID number of contributing  
federal political committee.

**C**

C00197095

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 9

Transaction ID: C4829578

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Nuclear Energy Institute Federal PAC

Mailing Address 1776 I Street NW  
4th Floor

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing  
federal political committee.

**C**

C00239848

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

Transaction ID: C4830180

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

15000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

PFIZER PAC

Mailing Address 235 East 42nd Street

City

New York

State

NY

Zip Code

10017

FEC ID number of contributing  
federal political committee.

**C**

C00016683

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4830006

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

PowerPAC of the Edison Electric Institute

Mailing Address 701 Pennsylvania Avenue NW

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

**C**

C00095869

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4830115

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

RENT-A-CENTER, INC. GOOD GOVERNMENT PAC

Mailing Address 5501 Headquarters Drive  
Floor 3

City

Plano

State

TX

Zip Code

75024

FEC ID number of contributing  
federal political committee.

**C**

C00410324

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4830042

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

7500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Securities Industry & Financial Markets Assn PAC

Mailing Address 1101 New York Ave., NW  
8th Floor

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00431312

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 0 / 2 0 0 9

Transaction ID: C4830012

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

SEIU COPE (SERVICE EMPLOYEES INTL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 Massachusetts Ave NW

City State Zip Code  
Washington DC 20036-1222

FEC ID number of contributing  
federal political committee.

**C** C00004036

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 1 / 2 0 0 9

Transaction ID: C4830051

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

The Home Depot Inc. PAC

Mailing Address 101 Constitution Avenue, NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00284885

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

Transaction ID: C4829776

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 58

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

TRANSPORT WORKERS UNION LOCAL 100 PCC

Mailing Address 1700 Broadway

City

New York

State

NY

Zip Code

10019-5905

FEC ID number of contributing  
federal political committee.

**C**

C00135475

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829769

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

UAW VOLUNTARY COMMUNITY ACTION PROGRAM

Mailing Address 8000 East Jefferson Avenue

City

Detroit

State

MI

Zip Code

48214

FEC ID number of contributing  
federal political committee.

**C**

C00002840

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 9

Transaction ID: C4829636

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

UNITED MINE WORKERS OF AMERICA - COAL MINERS PAC

Mailing Address 18354 QUANTICO GATEWAY DR  
SUITE 200

City

TRIANGLE

State

VA

Zip Code

22172

FEC ID number of contributing  
federal political committee.

**C**

C00013342

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 9

Transaction ID: C4829613

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 58

(check only one)

<input type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input checked="" type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
--------------------------	-----	--------------------------	-----	-------------------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Wyeth Good Government Fund

Mailing Address Five Giralda Farms

City

Madison

State

NJ

Zip Code

07940

FEC ID number of contributing  
federal political committee.**C**

C00115303

Name of Employer

Occupation

Receipt For:

☐  
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	0	9

Transaction ID: C4829685

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional) .....

5000.00

TOTAL This Period (last page this line number only) .....

120694.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 58

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Florence Gould Hall

Mailing Address 55 East 59th Street

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1296.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 0 9

Transaction ID: C5441424

Amount of Each Receipt this Period

1296.00

Refund of 7/13/2009 Payment

**SUBTOTAL** of Receipts This Page (optional) .....

1296.00

**TOTAL** This Period (last page this line number only) .....

1296.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 58

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address PO Box 25118

City

Tampa

State

FL

Zip Code

33622

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Other (specify) ▼

Aggregate Year-to-Date ▼

950.29

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 3 / 2 0 0 9

Transaction ID: C5441407

Amount of Each Receipt this Period

0.33

Interest

**SUBTOTAL** of Receipts This Page (optional) .....

0.33

**TOTAL** This Period (last page this line number only) .....

0.33

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Adobe Systems, Inc

Mailing Address 345 Park Avenue

City  
San Jose

State  
CA

Zip Code  
95110

Purpose of Disbursement  
Computer Software

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D340990

Date of Disbursement

/   /

Amount of Each Disbursement this Period

481.11

**B.**

Full Name (Last, First, Middle Initial)

American Airlines

Mailing Address 4333 Armon Carter Blvd

City  
Fort Worth

State  
TX

Zip Code  
76155

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D341474

Date of Disbursement

/   /

Amount of Each Disbursement this Period

670.40

**C.**

Full Name (Last, First, Middle Initial)

Atlantech Online

Mailing Address 1010 Wayne Avenue  
Suite 630

City  
Silver Spring

State  
MD

Zip Code  
20910

Purpose of Disbursement  
Internet Hosting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D341801

Date of Disbursement

/   /

Amount of Each Disbursement this Period

37.45

**SUBTOTAL** of Disbursements This Page (optional) .....

1188.96

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Atlantech Online

Mailing Address 1010 Wayne Avenue  
Suite 630

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Internet Hosting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D341805

Date of Disbursement

08 / 05 / 2009

Amount of Each Disbursement this Period

37.45

**B.**

Full Name (Last, First, Middle Initial)

Atlantech Online

Mailing Address 1010 Wayne Avenue  
Suite 630

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Internet Hosting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D341807

Date of Disbursement

09 / 02 / 2009

Amount of Each Disbursement this Period

37.45

**C.**

Full Name (Last, First, Middle Initial)

Atlantech Online

Mailing Address 1010 Wayne Avenue  
Suite 630

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Internet Hosting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D341809

Date of Disbursement

10 / 05 / 2009

Amount of Each Disbursement this Period

37.45

**SUBTOTAL** of Disbursements This Page (optional) .....

112.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Atlantech Online

Mailing Address 1010 Wayne Avenue  
Suite 630

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Internet Hosting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D341810

Date of Disbursement

11 / 03 / 2009

Amount of Each Disbursement this Period

62.45

B.

Full Name (Last, First, Middle Initial)

Atlantech Online

Mailing Address 1010 Wayne Avenue  
Suite 630

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement  
Internet Hosting

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D341742

Date of Disbursement

07 / 03 / 2009

Amount of Each Disbursement this Period

39.12

C.

Full Name (Last, First, Middle Initial)

Back Room

Mailing Address 102 Norfolk Street

City New York State NY Zip Code 10002

Purpose of Disbursement  
Facility Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D341218

Date of Disbursement

07 / 13 / 2009

Amount of Each Disbursement this Period

643.00

**SUBTOTAL** of Disbursements This Page (optional) .....

744.57

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address PO Box 25118

City  
Tampa

State  
FL

Zip Code  
33622

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D341311

Date of Disbursement

/   /

Amount of Each Disbursement this Period

140.90

**B.**

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address PO Box 25118

City  
Tampa

State  
FL

Zip Code  
33622

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D341317

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6.00

**C.**

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address PO Box 25118

City  
Tampa

State  
FL

Zip Code  
33622

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** D341325

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.90

**SUBTOTAL** of Disbursements This Page (optional) .....

211.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address PO Box 25118

City  
Tampa

State  
FL

Zip Code  
33622

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341327

Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

6.00

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address PO Box 25118

City  
Tampa

State  
FL

Zip Code  
33622

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341357

Date of Disbursement

11 / 04 / 2009

Amount of Each Disbursement this Period

65.90

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address PO Box 25118

City  
Tampa

State  
FL

Zip Code  
33622

Purpose of Disbursement  
Bank Fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341370

Date of Disbursement

10 / 05 / 2009

Amount of Each Disbursement this Period

64.90

**SUBTOTAL** of Disbursements This Page (optional) .....

136.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 25118	<b>Transaction ID:</b> D341373 <b>Date of Disbursement</b> <div> <div>08</div> <div>04</div> <div>2009</div> </div>
City Tampa State FL Zip Code 33622 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>64.90</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 25118 City Tampa State FL Zip Code 33622 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D341374 <b>Date of Disbursement</b> <div> <div>09</div> <div>04</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>64.90</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Bellagio Las Vegas Mailing Address 3600 Las Vegas Boulevard South City Las Vegas State NV Zip Code 89109 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D341172 <b>Date of Disbursement</b> <div> <div>11</div> <div>17</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>567.01</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**696.81**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 58

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Best Buy	<b>Transaction ID:</b> D341917 <b>Date of Disbursement</b>
Mailing Address 5800 Leesburg Pike	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 6 / 2 0 0 9</div> </div>
City Falls Church State VA Zip Code 22042	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Supplies	<div>141.72</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Best Buy	<b>Transaction ID:</b> D341920 <b>Date of Disbursement</b>
Mailing Address 5800 Leesburg Pike	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 6 / 2 0 0 9</div> </div>
City Falls Church State VA Zip Code 22042	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Supplies	<div>1483.97</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Charlie Palmer Steakhouse	<b>Transaction ID:</b> D340945 <b>Date of Disbursement</b>
Mailing Address 101 Constitution Avenue NW	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 0 8 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Catering Services	<div>30.40</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1656.09

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Charlie Palmer Steakhouse	<b>Transaction ID:</b> D340946 <b>Date of Disbursement</b>																				
Mailing Address 101 Constitution Avenue NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	4		2	0	0	9												
City Washington State DC Zip Code 20001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Catering Services	<table border="1"> <tr> <td colspan="10">132.50</td> </tr> </table>	132.50																			
132.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Charlie Palmer Steakhouse	<b>Transaction ID:</b> D340947 <b>Date of Disbursement</b>																				
Mailing Address 101 Constitution Avenue NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	8		2	0	0	9												
City Washington State DC Zip Code 20001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Catering Services	<table border="1"> <tr> <td colspan="10">352.50</td> </tr> </table>	352.50																			
352.50																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) City Hall Restaurant New York	<b>Transaction ID:</b> D341716 <b>Date of Disbursement</b>																				
Mailing Address 131 Duane Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	3		2	0	0	9												
City New York State NY Zip Code 10013	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Facility Rental	<table border="1"> <tr> <td colspan="10">4795.98</td> </tr> </table>	4795.98																			
4795.98																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

5280.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Congressional Black Caucus Leadership Institute, Inc.	<b>Transaction ID:</b> D341753 <b>Date of Disbursement</b>																				
Mailing Address 227 Massachusetts Ave., NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	9		2	0	0	9												
City Washington State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Rent	<table border="1"> <tr> <td>1</td><td>2</td><td>0</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	1	2	0	0	.	0	0													
1	2	0	0	.	0	0															
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Corner Bakery	<b>Transaction ID:</b> D341174 <b>Date of Disbursement</b>																				
Mailing Address 50 Massachusetts Ave, NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	9												
City Washington State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Catering Services	<table border="1"> <tr> <td>8</td><td>3</td><td>.</td><td>0</td><td>5</td> </tr> </table>	8	3	.	0	5															
8	3	.	0	5																	
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Corner Bakery	<b>Transaction ID:</b> D341175 <b>Date of Disbursement</b>																				
Mailing Address 50 Massachusetts Ave, NE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	4		2	0	0	9												
City Washington State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Catering Services	<table border="1"> <tr> <td>2</td><td>5</td><td>1</td><td>.</td><td>9</td> </tr> </table>	2	5	1	.	9															
2	5	1	.	9																	
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**12334.24**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Corner Bakery

Mailing Address 50 Massachusetts Ave, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Catering Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D341178

Date of Disbursement

10 / 15 / 2009

Amount of Each Disbursement this Period

110.00

B.

Full Name (Last, First, Middle Initial)

Delta Airlines

Mailing Address PO Box 20766

City Atlanta State GA Zip Code 30320-0766

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D340976

Date of Disbursement

07 / 13 / 2009

Amount of Each Disbursement this Period

90.01

C.

Full Name (Last, First, Middle Initial)

Delta Airlines

Mailing Address PO Box 20766

City Atlanta State GA Zip Code 30320-0766

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D340979

Date of Disbursement

07 / 14 / 2009

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional) .....

215.01

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Delta Airlines Mailing Address PO Box 20766	<b>Transaction ID:</b> D340981 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 9</div> </div>
City Atlanta State GA Zip Code 30320-0766 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>105.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Design Cuisine Mailing Address 2659 S Shirlington Rd City Arlington State VA Zip Code 22206-2529 Purpose of Disbursement Catering Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D341691 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 3 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1353.50</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Florence Gould Hall Mailing Address 55 East 59th Street City New York State NY Zip Code 10022 Purpose of Disbursement Facility Rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D341195 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 9</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1301.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**2759.50**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Florence Gould Hall

Mailing Address 55 East 59th Street

City  
New York

State  
NY

Zip Code  
10022

Purpose of Disbursement  
Facility Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D341196

Date of Disbursement

07 / 13 / 2009

Amount of Each Disbursement this Period

1296.00

B.

Full Name (Last, First, Middle Initial)

Florence Gould Hall

Mailing Address 55 East 59th Street

City  
New York

State  
NY

Zip Code  
10022

Purpose of Disbursement  
Facility Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D341198

Date of Disbursement

07 / 13 / 2009

Amount of Each Disbursement this Period

729.00

C.

Full Name (Last, First, Middle Initial)

Grady's Cut Rate Liquors

Mailing Address 11743 Farmers Boulevard

City  
Jamaica

State  
NY

Zip Code  
11412

Purpose of Disbursement  
Catering Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D341208

Date of Disbursement

07 / 14 / 2009

Amount of Each Disbursement this Period

656.86

**SUBTOTAL** of Disbursements This Page (optional) .....

2681.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Grady's Cut Rate Liquors

Mailing Address 11743 Farmers Boulevard

City  
Jamaica

State  
NY

Zip Code  
11412

Purpose of Disbursement  
Catering Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341209

Date of Disbursement

/   /

Amount of Each Disbursement this Period

16.25

B.

Full Name (Last, First, Middle Initial)

Hilton Millenium

Mailing Address 55 Church Street

City  
New York

State  
NY

Zip Code  
10007

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341229

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1540.00

C.

Full Name (Last, First, Middle Initial)

Hilton Millenium

Mailing Address 55 Church Street

City  
New York

State  
NY

Zip Code  
10007

Purpose of Disbursement  
Facility Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341230

Date of Disbursement

/   /

Amount of Each Disbursement this Period

461.46

**SUBTOTAL** of Disbursements This Page (optional) .....

2017.71

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Hilton Millenium

Mailing Address 55 Church Street

City  
New York

State  
NY

Zip Code  
10007

Purpose of Disbursement  
Office Center Charge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341231

Date of Disbursement

07 / 16 / 2009

Amount of Each Disbursement this Period

1.98

B.

Full Name (Last, First, Middle Initial)

Hilton Millenium

Mailing Address 55 Church Street

City  
New York

State  
NY

Zip Code  
10007

Purpose of Disbursement  
Office Center Charge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341232

Date of Disbursement

07 / 20 / 2009

Amount of Each Disbursement this Period

39.00

C.

Full Name (Last, First, Middle Initial)

Hilton Millenium

Mailing Address 55 Church Street

City  
New York

State  
NY

Zip Code  
10007

Purpose of Disbursement  
Office Center Charge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341234

Date of Disbursement

07 / 14 / 2009

Amount of Each Disbursement this Period

3.98

**SUBTOTAL** of Disbursements This Page (optional) .....

44.96

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Congressional Black Caucus PAC

**A.**

Full Name (Last, First, Middle Initial)  
Hilton Millenium

Mailing Address 55 Church Street

City State Zip Code  
New York NY 10007

Purpose of Disbursement  
Office Center Charge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D341235

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.95

**B.**

Full Name (Last, First, Middle Initial)  
Hilton Millenium

Mailing Address 55 Church Street

City State Zip Code  
New York NY 10007

Purpose of Disbursement  
Office Center Charge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D341236

Date of Disbursement

/   /

Amount of Each Disbursement this Period

82.88

**C.**

Full Name (Last, First, Middle Initial)  
Hilton Millenium

Mailing Address 55 Church Street

City State Zip Code  
New York NY 10007

Purpose of Disbursement  
Facility Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D341237

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6414.11

**SUBTOTAL** of Disbursements This Page (optional) .....

6501.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Hilton Millenium	<b>Transaction ID:</b> D341238 <b>Date of Disbursement</b>
Mailing Address 55 Church Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 6 / 2 0 0 9</div> </div>
City New York State NY Zip Code 10007	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Center Charge	<div> <div></div> <div>9.95</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Hilton Millenium	<b>Transaction ID:</b> D341239 <b>Date of Disbursement</b>
Mailing Address 55 Church Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 6 / 2 0 0 9</div> </div>
City New York State NY Zip Code 10007	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Center Charge	<div> <div></div> <div>1.98</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Hilton Millenium	<b>Transaction ID:</b> D341240 <b>Date of Disbursement</b>
Mailing Address 55 Church Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 0 9</div> </div>
City New York State NY Zip Code 10007	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Facility Rental	<div> <div></div> <div>104.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**115.93**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Hilton Millenium

Mailing Address 55 Church Street

City  
New York

State  
NY

Zip Code  
10007

Purpose of Disbursement  
Office Center Charge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D341241

Date of Disbursement

07 / 14 / 2009

Amount of Each Disbursement this Period

20.79

B.

Full Name (Last, First, Middle Initial)

Hilton Millenium

Mailing Address 55 Church Street

City  
New York

State  
NY

Zip Code  
10007

Purpose of Disbursement  
Office Center Charge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D341242

Date of Disbursement

07 / 16 / 2009

Amount of Each Disbursement this Period

28.71

C.

Full Name (Last, First, Middle Initial)

Hilton Millenium

Mailing Address 55 Church Street

City  
New York

State  
NY

Zip Code  
10007

Purpose of Disbursement  
Office Center Charge

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D341243

Date of Disbursement

07 / 08 / 2009

Amount of Each Disbursement this Period

69.77

**SUBTOTAL** of Disbursements This Page (optional) .....

119.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Hilton Millenium	<b>Transaction ID:</b> D341244 <b>Date of Disbursement</b>																				
Mailing Address 55 Church Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		1	5		2	0	0	9												
City New York State NY Zip Code 10007	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Facility Rental Candidate Name	<table border="1"> <tr> <td colspan="10">552.72</td> </tr> </table>	552.72																			
552.72																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Saffie Kamara	<b>Transaction ID:</b> D340877 <b>Date of Disbursement</b>																				
Mailing Address 3330 King St	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	7		2	0	0	9												
City Alexandria State VA Zip Code 22302-3001	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Intern Stipend Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Jessica Knight	<b>Transaction ID:</b> D340901 <b>Date of Disbursement</b>																				
Mailing Address 1368 Euclid St., NW #703	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	3		2	0	0	9												
City Washington State DC Zip Code 20009-4818	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Administrative & Managerial Consulting Services Candidate Name	<table border="1"> <tr> <td colspan="10">7117.00</td> </tr> </table>	7117.00																			
7117.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**8169.72**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Congressional Black Caucus PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Jessica Knight</p> <p>Mailing Address 1368 Euclid St., NW #703</p> <p>City Washington State DC Zip Code 20009-4818</p> <p>Purpose of Disbursement Administrative &amp; Managerial Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D340902</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 7117.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Jessica Knight</p> <p>Mailing Address 1368 Euclid St., NW #703</p> <p>City Washington State DC Zip Code 20009-4818</p> <p>Purpose of Disbursement Administrative &amp; Managerial Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D340903</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 7117.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Jessica Knight</p> <p>Mailing Address 1368 Euclid St., NW #703</p> <p>City Washington State DC Zip Code 20009-4818</p> <p>Purpose of Disbursement Administrative &amp; Managerial Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D340904</p> <p>Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 7117.00</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

21351.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Jessica Knight

Mailing Address 1368 Euclid St., NW  
#703

City Washington State DC Zip Code 20009-4818

Purpose of Disbursement  
Administrative & Managerial Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D340907

Date of Disbursement

11 / 30 / 2009

Amount of Each Disbursement this Period

7117.00

B.

Full Name (Last, First, Middle Initial)

Jessica Knight

Mailing Address 1368 Euclid St., NW  
#703

City Washington State DC Zip Code 20009-4818

Purpose of Disbursement  
Administrative & Managerial Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D340908

Date of Disbursement

07 / 01 / 2009

Amount of Each Disbursement this Period

7117.00

C.

Full Name (Last, First, Middle Initial)

Jessica Knight

Mailing Address 1368 Euclid St., NW  
#703

City Washington State DC Zip Code 20009-4818

Purpose of Disbursement  
Administrative & Managerial Consulting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D340909

Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

7117.00

SUBTOTAL of Disbursements This Page (optional) .....

21351.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 46 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Lockheed Martin

Mailing Address 5335 Wisconsin Avenue Northwest

City Washington State DC Zip Code 20015

Purpose of Disbursement

Facility Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D340966

Date of Disbursement

11 / 12 / 2009

Amount of Each Disbursement this Period

1360.00

B.

Full Name (Last, First, Middle Initial)

Mobay Uptown New York Restaurant and Bar

Mailing Address 17 West 125 Street

City New York State NY Zip Code 10027

Purpose of Disbursement

Facility Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341173

Date of Disbursement

07 / 13 / 2009

Amount of Each Disbursement this Period

6281.26

C.

Full Name (Last, First, Middle Initial)

Nine Steakhouse

Mailing Address 4321 West Flamingo Road

City Las Vegas State NV Zip Code 89103

Purpose of Disbursement

Catering Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341010

Date of Disbursement

11 / 17 / 2009

Amount of Each Disbursement this Period

215.00

SUBTOTAL of Disbursements This Page (optional) .....

7856.26

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Phoenix Park Hotels	<b>Transaction ID:</b> D341922 <b>Date of Disbursement</b>
Mailing Address 520 N Capitol Street NW	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 2 1 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Travel	<div>951.25</div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Dexter Sanders	<b>Transaction ID:</b> D340817 <b>Date of Disbursement</b>
Mailing Address 10918 Farmers Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 3 / 2 0 0 9</div> </div>
City Saint Albans State NY Zip Code 11412-1003	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Catering Services	<div>500.00</div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Dexter Sanders	<b>Transaction ID:</b> D340818 <b>Date of Disbursement</b>
Mailing Address 10918 Farmers Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 9</div> </div>
City Saint Albans State NY Zip Code 11412-1003	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Catering Services	<div>780.00</div>
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

2231.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Shark Bar

Mailing Address 307 Amsterdam Avenue

City  
New York

State  
NY

Zip Code  
10023

Purpose of Disbursement  
Facility Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341222

Date of Disbursement

07 / 13 / 2009

Amount of Each Disbursement this Period

343.81

B.

Full Name (Last, First, Middle Initial)

Shark Bar

Mailing Address 307 Amsterdam Avenue

City  
New York

State  
NY

Zip Code  
10023

Purpose of Disbursement  
Facility Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341223

Date of Disbursement

07 / 13 / 2009

Amount of Each Disbursement this Period

2403.37

C.

Full Name (Last, First, Middle Initial)

Stamps.com

Mailing Address 12959 Coral Tree Place

City  
Los Angeles

State  
CA

Zip Code  
90066

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341695

Date of Disbursement

07 / 09 / 2009

Amount of Each Disbursement this Period

17.99

**SUBTOTAL** of Disbursements This Page (optional) .....

2765.17

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Stamps.com

Mailing Address 12959 Coral Tree Place

City  
Los Angeles

State  
CA

Zip Code  
90066

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341697

Date of Disbursement

12 / 09 / 2009

Amount of Each Disbursement this Period

17.99

B.

Full Name (Last, First, Middle Initial)

Stamps.com

Mailing Address 12959 Coral Tree Place

City  
Los Angeles

State  
CA

Zip Code  
90066

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341698

Date of Disbursement

11 / 09 / 2009

Amount of Each Disbursement this Period

17.99

C.

Full Name (Last, First, Middle Initial)

Stamps.com

Mailing Address 12959 Coral Tree Place

City  
Los Angeles

State  
CA

Zip Code  
90066

Purpose of Disbursement  
Postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341704

Date of Disbursement

10 / 09 / 2009

Amount of Each Disbursement this Period

17.99

**SUBTOTAL** of Disbursements This Page (optional) .....

53.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Stamps.com	<b>Transaction ID:</b> D341706 <b>Date of Disbursement</b>
Mailing Address 12959 Coral Tree Place	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 0 / 2 0 0 9</div> </div>
City Los Angeles State CA Zip Code 90066	<b>Amount of Each Disbursement this Period</b> <div>17.99</div>
Purpose of Disbursement Postage Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Stamps.com	<b>Transaction ID:</b> D341709 <b>Date of Disbursement</b>
Mailing Address 12959 Coral Tree Place	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 9 / 2 0 0 9</div> </div>
City Los Angeles State CA Zip Code 90066	<b>Amount of Each Disbursement this Period</b> <div>17.99</div>
Purpose of Disbursement Postage Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D340993 <b>Date of Disbursement</b>
Mailing Address 3307 M St NW	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 5 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20007-3539	<b>Amount of Each Disbursement this Period</b> <div>107.03</div>
Purpose of Disbursement Office Supplies Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**143.01**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D340995 <b>Date of Disbursement</b>
Mailing Address 3307 M St NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 0 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20007-3539	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Supplies Candidate Name	<div> <div>309.07</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D341004 <b>Date of Disbursement</b>
Mailing Address 3307 M St NW	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 6 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20007-3539	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Supplies Candidate Name	<div> <div>125.69</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Staples	<b>Transaction ID:</b> D341008 <b>Date of Disbursement</b>
Mailing Address 3307 M St NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 8 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20007-3539	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Office Supplies Candidate Name	<div> <div>44.59</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**479.35**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

UPS

Mailing Address 455 Massachusetts Ave NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Shipping

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341164

Date of Disbursement

11 / 12 / 2009

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)

UPS

Mailing Address 455 Massachusetts Ave NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Shipping

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341165

Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

534.04

C.

Full Name (Last, First, Middle Initial)

Verizon Center

Mailing Address 601 F Street Northwest

City  
Washington

State  
DC

Zip Code  
20004

Purpose of Disbursement  
Facility Rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D341027

Date of Disbursement

10 / 05 / 2009

Amount of Each Disbursement this Period

652.89

**SUBTOTAL** of Disbursements This Page (optional) .....

1196.93

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 6050	<b>Transaction ID:</b> D341109 <b>Date of Disbursement</b> <div> <div>09</div> <div>14</div> <div>2009</div> </div>
City Inglewood State CA Zip Code 90312 Purpose of Disbursement Telecommunication Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>242.88</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 6050 City Inglewood State CA Zip Code 90312 Purpose of Disbursement Telecommunication Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D341111 <b>Date of Disbursement</b> <div> <div>08</div> <div>12</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>244.57</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 6050 City Inglewood State CA Zip Code 90312 Purpose of Disbursement Telecommunication Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D341114 <b>Date of Disbursement</b> <div> <div>10</div> <div>14</div> <div>2009</div> </div> <b>Amount of Each Disbursement this Period</b> <div>242.95</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**730.40**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 6050	<b>Transaction ID:</b> D341120 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td> <td>1</td><td>4</td><td></td> <td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0	9	
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	4		2	0	0	9													
City Inglewood State CA Zip Code 90312 Purpose of Disbursement Telecommunication Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>76.91</td> </tr> </table>	76.91																				
76.91																						
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 6050 City Inglewood State CA Zip Code 90312 Purpose of Disbursement Telecommunication Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D341127 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td> <td>1</td><td>3</td><td></td> <td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>90.51</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	3		2	0	0	9	90.51
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		1	3		2	0	0	9													
90.51																						
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address PO Box 6050 City Inglewood State CA Zip Code 90312 Purpose of Disbursement Telecommunication Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D341142 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td> <td>D</td><td>D</td><td>/</td> <td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td> <td>1</td><td>3</td><td></td> <td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td>240.93</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	3		2	0	0	9	240.93
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		1	3		2	0	0	9													
240.93																						

**SUBTOTAL** of Disbursements This Page (optional) .....

**408.35**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 55 / 58

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Jessica Knight</p> <p>Mailing Address 1368 Euclid St., NW #703</p> <p>City Washington State DC Zip Code 20009-4818</p> <p>Purpose of Disbursement Reimbursement: Travel &amp; Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D340905</p> <p>Date of Disbursement 10 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 2129.18</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) National Car Rental</p> <p>Mailing Address 1 Aviation Cir</p> <p>City Washington State DC Zip Code 20001-6000</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D400881</p> <p>Date of Disbursement 10 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 801.03</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3307 M St NW</p> <p>City Washington State DC Zip Code 20007-3539</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D400882</p> <p>Date of Disbursement 10 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 223.13</p> <p><b>[MEMO ITEM]</b></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

2129.18

**TOTAL** This Period (last page this line number only) .....

105684.37

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 / 58

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Bill Owens for Congress	<b>Transaction ID:</b> D341994 <b>Date of Disbursement</b>
Mailing Address PO Box 1575	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 3 / 2 0 0 9</div> </div>
City State Zip Code Plattsburgh NY 12901	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>5000.00</div>
Candidate Name Bill Owens	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General
<b>B.</b> Full Name (Last, First, Middle Initial) Hilliard For Congress	<b>Transaction ID:</b> D341951 <b>Date of Disbursement</b>
Mailing Address PO Box 11705	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 3 / 2 0 0 9</div> </div>
City State Zip Code Birmingham AL 35202-1705	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>5000.00</div>
Candidate Name Earl Hilliard	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Kendrick Meek for Florida	<b>Transaction ID:</b> D342029 <b>Date of Disbursement</b>
Mailing Address 111 NW 183rd Street Suite 325	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 4 / 2 0 0 9</div> </div>
City State Zip Code Miami FL 33169	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Contribution	<div>5000.00</div>
Candidate Name Kendrick Meek	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

15000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 57 / 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Richmond for Congress

Mailing Address 1631 Elysian Fields Ave  
Ste 150

City State Zip Code  
New Orleans LA 70117-8208

Purpose of Disbursement  
Contribution

Candidate Name  
Cedric Richmond

Office Sought: ☒ House  
☐ Senate  
☐ President

State: LA District: 02

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: D341934

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) .....

5000.00

TOTAL This Period (last page this line number only) .....

20000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 58 / 58

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Black Caucus PAC

A.

Full Name (Last, First, Middle Initial)

Congressional Black Caucus Foundation, Inc

Mailing Address 1720 Massachusetts Avenue, NW

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D341870

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8000.00

SUBTOTAL of Disbursements This Page (optional) .....

8000.00

TOTAL This Period (last page this line number only) .....

8000.00